

IPW

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Project of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/710,463	
	Filing Date	7/13/2004	
	First Named Inventor	Cox	
	Art Unit	2681	
	Examiner Name	Not Yet Assigned	
Total Number of Pages in This Submission	4	Attorney Docket Number	PSI-001

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO Form 1449 (1 pg.); Copies of Cited References (B1-B3) and Return Receipt Postcard.
<input type="checkbox"/> Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Rauschenbach Patent Law Group, LLC		
Signature			
Printed name	Kurt Rauschenbach		
Date	January 11, 2005	Reg. No.	40,137

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Kurt Rauschenbach	Date	January 11, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /L.P./



PATENT  
Attorney Docket No. PSI-001

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Cox, et al.  
SERIAL NO.: 10/710,463 GROUP NO.: 2681  
FILING DATE: July 13, 2004 EXAMINER: Not Yet Assigned  
TITLE: BI-DIRECTIONAL SIGNAL INTERFACE

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

Commissioner for Patents  
P.O. BOX 1450  
Alexandria, VA 22313-1450

Sir:

In accordance with the provisions of 37 C.F.R. §1.97, Applicants hereby make of record the references listed on the accompanying Form PTO-1449 for consideration by the Examiner in connection with the examination of the above-identified patent application. Copies of the references are enclosed. Also, enclosed is a copy of the International Search Report for the PCT counterpart application.

**REMARKS**

In accordance with the provisions of 37 C.F.R. §1.97, this statement is being filed (CHECK ONE):

- ☒ (1) within three months of the Filing Date of a national application other than a continued prosecution application under § 1.53(d); or within three months of the date of entry of the national stage as set forth in § 1.491 in an international application; or before the mailing of a first Office action on the merits; or before the mailing of a first Office action after the filing of a request for continued examination under § 1.114; or
- ☐ (2) after the period defined in (1) but before the mailing date of a Final Action or Notice of Allowance, and
- ☐ the Statement required under § 1.97(e) below , OR
- ☐ the fee set forth in § 1.17(p), namely \$180.00, is included herein, or
- ☐ (3) after the mailing date of a Final Action or Notice of Allowance but before the payment of the Issue Fee, AND
- ☐ the Statement required under § 1.97(e) below; and

ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /L.P./

☐ the fee set forth in § 1.17(p), namely \$180.00 is included herein.

It is respectfully requested that each of the references shown on the attached Form PTO-1449 be made of record in this application.

### STATEMENT

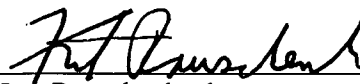
As required under §1.97(e), Applicants, through the undersigned, hereby state either that [check the appropriate space]:

- ☐ 1. That each item of information contained in the Information Disclosure Statement was first cited in any communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing date of the Information Disclosure Statement; or
- ☐ 2. That no item of information contained in the Information Disclosure Statement was cited in a communication from a foreign patent office in a counterpart foreign application, and, to the knowledge of the person signing the certification after making reasonable inquiry, no item of information contained in the Information Disclosure Statement was known to any individual designated in §1.56(c) more than three months prior to the filing of the Information Disclosure Statement.

### FEE AUTHORIZATION

Should any fee associated with the submission of this paper not be attached hereto as a check, the Commissioner is authorized to charge the missing fee to our Deposit Account, No. 501211. Any overpayments should be credited to said Deposit Account.

Respectfully submitted,



Kurt Rauschenbach  
Atty/Agent for Applicant(s)  
Rauschenbach Patent Law Group, LLC  
Post Office Box 387  
Bedford, MA 01730

Date: January 11, 2005  
Reg. No. 40,137

Tel. No.: (781) 271-1503  
Fax No.: (781) 271-1527

JAN 13 2005

PTO/SB/08a (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449A

## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

*(Use as many sheets as necessary)*

Sheet

1

Q

1

Attorney Docket Number

PSI-001

**Complete if Known**

Application Number

10/710,463

Filing Date

7/13/2004

First Named Inventor

Cox	
-----	--

**Art Unit**

2681

Examiner Name

Not Yet Assigned
------------------

Attorney Docket Number

PSI-001

## U. S. PATENT DOCUMENTS

[illegible]

## FOREIGN PATENT DOCUMENTS

Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
		Country Code <sup>3</sup> Number <sup>4</sup> Kind Code <sup>5</sup> (if known)				
	B1	EP 0282293 A2	09-14-1988	Hittite Microwave...		
	B2	JP 57197934	12-04-1982	Fujitsu Ten KK		
	B3	JP 09008737	01-10-1997	Tokin Corp.		

Examiner  
Signature

/Leslie Pascal/

Date  
Considered

04/07/2008

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 1 Applicant's unique citation designation number (optional). 2 See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. 3 Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). 4 For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. 5 Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. 6 Applicant is to place a check mark here if English language Translation is attached.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: **Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

*If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.*

ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /L.P./